

APPLICATION FOR REPRESENTATIVE LICENSE

(PLEASE PRINT CLEARLY IN BLACK INK OR TYPE)

FOR DEPARTMENT USE ONLY
OL NUMBER ISSUED
DATE ISSUED
DATE EXPIRES
RECEIPT NUMBER

- 1. It is complete and accurate.
- 2. The Live Scan Fingerprint Clearance receipt (yellow copy) is completed and attached (required for original applications only).
- 3. The correct fee is included as listed in Section A.
- 4. Mail completed application to: Department of Motor Vehicles, Licensing Operations Section, MS L224, P.O. Box 932342, Sacramento, CA 94232-3420.

A ADDI								
A. AFFL	YING FOR:	(Check one bo	ox)					
DISTRIBUTOR REPRESENTATIVE MANUFACTURER REPRESENTATIVE		Original \$51.00	☐ Renewal \$86	.00	☐ Reinstatement \$51.00 ☐ Reinstatement \$51.00			
		☐ Original \$51.00	☐ Renewal \$86	.00				
B. APPL	ICANT INF	ORMATION: (T	pe or Print) USE YOUI	R TRUE FULL NAME				
	MIDDLE, LAST)	()	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		AREA CO	DE/TELEPHONE NUMBER		
					()		
ESIDENCE AD	DDRESS (NUMBER	AND STREET)	CITY		STATE	ZIP CODE		
THER ADDRE	ESS, IF APPLICABL	E (P. O. BOX OR PRIVAT	E MAIL BOX) CITY		STATE	ZIP CODE		
ATE OF BIRTH	Н	SEX	HAIR COLOR	EYE COLOR	HEIGHT	WEIGHT		
		☐ Male ☐ Fen	nale					
ALIFORNIA DE	RIVER LICENSE/ID	ENTIFICATION NUMBER	EXPIRATION D.	ATE SOCIAL SECURITY	NUMBER	<u>'</u>		
YES, LIST NA	AME(S)		ovided must be the sa	me as Employer's Lic	ense)	Yes 1		
FIRM NAME			FIRM LICENSE	NUMBER	AREA CO	AREA CODE/TELEPHONE NUMBER		
					1	1		
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IRM ADDRESS	S (NUMBER AND S	TREET)	CITY		STATE	ZIP CODE		
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FROM MO YR ATTACH SEPA ATTACH SEPA Have your represe driving separates.	TO MO YR ARATE SHEET IF A TIONAL BA YOU previously entative, distri	NAMES, AD DDITIONAL SPACE IS NE CKGROUND IN been or are you butor, dealer, dism , operator, instruct	NT RECORD FOR PAS EMPLOYERS: DDRESSES, TYPE OF BUSINESS EDED) FORMATION: now licensed or have you nantler, manufacturer, rema	ever applied in this state nufacturer, transporter, ve	DUTIES F	PERFORMED DE Salesperson,		

						OL NO.					
3.	bankrupto	ere you ever a partner, managerial employee, officer, director, or stockholder in a firm that had a civil judgement or inkruptcy rendered against it, or you as an individual?									
4.			nal charges pending against you JMBER, AND NATURE OF THE CHARGES	ending against you in any state or federal court?							
5.	FROM IN Federal o	CARCERATION FOLI r State jurisdiction, wi	NSES, have you ever been CON LOWING CONVICTION for any crethin the last ten years? Read Imp	ime or offense, eit portant Notice be	ther Felon low and c	y or Misdemea complete	anor, of ANY]Yes □No			
			IMPORTAN	IT NOTICE							
l	TO EXPED	ITE A REVIEW OF YO	OUR APPLICATION, YOU MAY	SUBMIT A COPY	OF THE	ARRESTING	AGENCY REF	PORT			
	AND A CE	RTIFIED COPY OF TH	HE COURT DOCUMENTS.								
	disclose t	he conviction. Failu on of the temporary pe ecessarily preclude	awaiting judgment and senten ure to disclose all convictions, in ermit and may result in the refuse you from receiving a license.	ncluding those or	ut-of-state onal licen Applica	e or out-of-co	conviction inf	sult in the ormation			
F.	MISDEN	IEANOR OR FELO	NY CONVICTIONS:								
С	CONVICTION DATE	CONVICTED OF	COURT OF JURISDICTION (FULL NAME AND ADDRESS)		DISPOSITION OF OFFENSE (DESCRIBE SENTENCE) Amount						
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È		ANT CERTIFICATION	,								
I c		r penalty of perjury u	under the laws of the State of Ca	alifornia that the	foregoing	ON (DATE)	correct.				
sig X	NED										
Н.	EMPLO	YING LICENSEE'S	ACKNOWLEDGMENT:								
na	med applic		ized representative of the emplo eives a temporary permit or lice	ense from the De	partment	of Motor Veh	icles.	oy the above			
DAT	E		TITLE (I.E., CORPORATE OFFICER, OWN	NER)	LICENSE NO	D. (SALES MANAGE	R'S LICENSE NO.)				
PRI	NT NAME			AUTHORIZED SIGNATU	l RE						

IT IS IMPORTANT THAT YOU READ AND UNDERSTAND THE FOLLOWING INFORMATION.

ADVISORY STATEMENT

The information required on the attached form pertains to eligibility for issuance of an occupational license. It is required under authority of Division 5 of the California Vehicle Code. Failure to provide the information is cause for refusal to issue an occupational license.

This information is public record, regularly used by law enforcement agencies, and is open to inspection by the public. Information contained in these records, classified as confidential or personal pursuant to the Information Practices Act of 1977 and the Public Records Act, is exempt from disclosure. Individuals are entitled to inspect or obtain copies of information contained in their records during regular office hours by prior arrangement.

The Occupational Licensing Branch, P.O. Box 932342, Sacramento, CA 94232-3420, is responsible for maintaining this information.

DISCLOSURE STATEMENT

SOCIAL SECURITY NUMBER COLLECTION DISCLOSURE – You are required by law to provide your social security number or your application will be denied.

"Your social security number will be collected pursuant to California Business and Professions Code Section 30. It is used in the administration of occupational licensing laws to determine eligibility for issuance or renewal of an occupational license subject to the applicable provisions of the California Vehicle Code, California Business and Professions Code Sections 29.5, 30 and 31, as well as California Welfare and Institutions Code Section 11350.6. It is also used to aid in the collection of monies owed in connection with failure to pay a fine or failure to appear in court by an applicant; and to aid in the collection of monies owed by an applicant in connection with Aid to Families with Dependent Children, Child Support and Establishment of paternity and Federal Payments for Foster Care and Adoption Assistance Programs, pursuant to 42 U.S.C. Section 405 and 42 U.S.C. Section 651 et seg.

Your social number is not provided for public inspection; however, it will be provided in response to requests for information from state and federal agencies operating and involved in the collection of taxes and child support payments pursuant to 42 U.S.C. 601 et seq., and California Business and Professions Code Section 30.

Collection of your social security number is mandatory. Failure to furnish the information requested will result in denial of processing an application for issuance or renewal of an occupational license or permit, pursuant to Business and Professions Code Section 30, subdivision(c)."

Please be advised that you may not reapply for a license until a period of one year has elapsed since a previous license for which you are applying now has been revoked, refused, or denied pursuant to California Vehicle Code Section 11903(c).

Applicant should retain this page for their information.